

FAUQUIER COUNTY DISABILITY SERVICES BOARD **2002-2003 NEEDS ASSESSMENT SURVEY**

INTRODUCTION:

The Fauquier County Disability Services Board (DSB) conducts a survey every other year to develop ways to assist citizens with PHYSICAL and/or SENSORY disabilities. This survey will be used by the DSB to develop a Needs Assessment Report. This Report will determine what areas need funding to improve the independence of people in Fauquier County who have PHYSICAL and/or SENSORY disabilities.

INSTRUCTIONS:

If you feel you have a PHYSICAL and/or SENSORY disability, please take the time to fill out the following questions and mail this survey to Cynthia Hair, DSB Office, 24 Pelham Street, Warrenton, VA 20186. You may also fill out a survey for a friend or family member, and if you prefer to complete this survey by telephone, please call Mrs. Hair at 540-341-7950 ext. 25. You may fax completed surveys to 540-349-1792 or drop them in marked boxes at all three branches of the Fauquier County Public Library. The survey is also available on the Fauquier County web site:

www.fauquiercounty.gov

(When you have reached the website, click on Committees
and select Disability Services Board or Library)

SURVEYS MUST BE RETURNED TO THE DSB STAFF OFFICE NO LATER THAN 1/17/03 TO BE CONSIDERED FOR THE REPORT.

DEMOGRAPHIC INFORMATION:

1. How old are you? _____
2. What is your zip code? _____
3. Highest level of education: High School____ College____(years?) Adv. Degree____
4. Employment Status: Part Time____ Full Time____ Unemployed____ Retired____
5. What is your disability? Hearing Impaired____ Visually impaired____ Mobility____
(other, please specify)_____
6. Do you use personal assistance? _____
7. Do you use a service animal? _____
8. Do you use special equipment (wheelchair, bed, scooter, bath, adapted vehicles)?
If Yes, please describe: _____

NEEDS ASSESSMENT:

Please rank these 12 categories in order of your greatest need (1 = highest and 12 = lowest)

- _____ Assistive Technology (wheelchairs, canes, walkers, ramps, etc.)
Specify: _____
- _____ Case Management (service coordination)
Specify: _____
- _____ Communication (Braille material, interpreters, TTY's, etc.)
Specify: _____
- _____ Counseling (professional help with vocational/personal problems)
Specify: _____
- _____ Education & Training (vocational, general and/or individualized)
Specify: _____
- _____ Employment Services (job search/placement, on-the-job training, etc.)
Specify: _____
- _____ Family Support (support groups, respite care, information for families)
Specify: _____
- _____ Housing (accessible or subsidized, home modifications)
Specify: _____
- _____ Independent Living Skills (budgeting, assertiveness training, etc.)
Specify: _____
- _____ Medical/Therapeutic Services (physical/vocational, general care)
Specify: _____
- _____ Personal Assistance Services (help w/dressing, bathing, etc.)
Specify: _____
- _____ Transportation (wheelchair accessible, public and/or extended bus routes/times, etc)
Specify: _____